

Employment Application Rev. 1, 8/4/04 Page 1 of 3

VILLAGE OF STURTEVANT is firmly committed to providing equal employment opportunity in all phases of employment activity, without regard to race, color, national origin, religion, sex, age, disability, veteran status, sexual preference, marital status, or any other status protected by relevant statute or ordinance.

Section A: Personal Information										
Last Name First		irst		Middle			Date			
Street Address						Home Telephone				
					( )	-				
City, State, Zip					Business Telephone					
e-mail address:			( ) -							
Have you ever applied for employment with VILLAGE OF STURTEVANT?						Social Security #				
Yes No If Yes: Month & Year Location										
Position Desired:	Salary Desired:				Are you of the legal age to work?					
					☐ Yes ☐ No					
Are you available for full-time work?  Yes No Will you work overtime if asked?  Yes No										
If not, what hours can you work?										
When will you be available to begin work?										
Are you willing to travel if the job requires it?   Yes   No Are you willing to relocate?   Yes   No										
Are you legally eligible for employment in the United States?   Yes   No										
Proof of U.S. Citizenship or immigration status will be required upon employment.										
Section B: Education and Experience Information										
Level of Schooling	Name and Location (C State) of School	City, Course of	Course of Study		Did You Graduate?					
Graduate										
Undergraduate										
Business/Trade/ Technical										
High School										
Membership in Job-Related Professional or Civic Organizations (Exclude those which may disclose personal affiliations)										
Military Experience										
Military Experience				If Yes, What Branch?						
Describe Training Relative to Desired Position:										



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Previous Employment							
(Please give complete full-time and part-time employment record beginning	with present or most recent employer. Use a separate page if necessary).						
Company Name	Name of Supervisor						
Address	Telephone						
	( ) -						
Employed (month and year):	Start Last						
From To	Annual Incentive/Bonus/Other:						
State Job Title and Describe Your Work:	Reason for Leaving:						
May we contact this employer?	If No, Please State Reason:						
Company Name	Name of Supervisor						
, ,	·						
Address	Telephone						
	( ) -						
Employed (month and year):	Start Last						
From To	Annual Incentive/Bonus/Other:						
State Job Title and Describe Your Work:	Reason for Leaving:						
May we contact this employer?	If No, Please State Reason:						
Company Name	Name of Supervisor						
. ,	·						
Address	Telephone						
	( ) -						
Employed (month and year):	Start Last						
From To	Annual Incentive/Bonus/Other:						
State Job Title and Describe Your Work:	Reason for Leaving:						
May we contact this employer?	If No, Please State Reason:						
Company Name	Name of Supervisor						
Address	Telephone						
	( ) -						
Employed (month and year):	Start Last						
From To	Annual Incentive/Bonus/Other:						
State Job Title and Describe Your Work:	Reason for Leaving:						



Signature

## **Employment Application**

ON THE MOVE	mpioyment A	yppiic	ation	Rev	. 1, 8/4/04	Tag	ge 3 of 3	
May we contact this employer?	es 🗌 No	If No, P	lease State F	Reason:				
Additional Special Training or Skills (i	including classes, la	nguages.	machine ope	eration, etc.)				
<b>3</b> • • • • • • • • • • • • • • • • • • •	g , .	3 - 3 ,						
Section C: Miscellaneous Information	1							
Have you ever received a government se	ecurity clearance?				☐ Ye	es	☐ No	o
If Yes, state employer name, go	vernment agency ar	nd clearar	ice level.					
Have you been convicted of a felony in t from the court record?	he past ten years wl	hich has r	not been "sea	led," expung	ed, or oth		e strick	
If Yes, describe in full. (Conviction will not necessarily disqualify	y an applicant)							
Did you leave the Department of Defens GS-13 or higher, or in a pay grade of 04	` '				ie DoD in Ye		grade	
State names of relatives and friends wor	king for Village of St	turtevant.						
How did you hear about the Position?	wspaper (name)		Website _	Referral	Othe	r		
Professional References (Not employers	s or relatives)							
Name			Phone (	) -				
Name			Phone (	) -				
Name			Phone (	) -				
My signature below constitutes full acceptance of this employment application in its entirety and certifies that the information provided herein is true and correct to the best of my knowledge. I hereby authorize my present and past employers and educational institutions/providers to release to Village of Sturtevant information about my employment or educational history which is in their possession or subject to their control, including information contained in my personnel file. I voluntarily authorize VILLAGE OF STURTEVANT to make investigations of my person, employment, and other related matters as may be necessary in arriving at an employment decision or verifying information related to my application. I hereby release from all liability all persons or entities supplying or collecting such information.								
If I am offered employment, I understand the offer is contingent on the outcome of any investigations or reference checks satisfactory to VILLAGE OF STURTEVANT. If I am employed, I understand that if I have deliberately omitted or given false or misleading information in this application, my resume (if any), or interview(s) I may be discharged. If VILLAGE OF STURTEVANT accepts me for employment, I agree to abide by all of Village of Sturtevant's policies and practices during my employment. If I am employed, I understand that I will be required to sign agreements regarding secrecy of communications and inventions, discoveries, or developments that make, discover, or develop during my employment at VILLAGE OF STURTEVANT. In accordance with Village of Sturtevant's policy to maintain a drug-free workplace, VILLAGE OF STURTEVANT reserves the right to make an offer of employment contingent upon an applicant submitting to a drug test and receiving a negative drug test result. I hereby acknowledge that, if I am hired, I may also be subject to random drug and alcohol testing and that, if I test positively, my employment is subject to termination. I understand that my employment is contingent on my successful compliance with all employment eligibility verification requirements of the Immigration Reform and Control Act of 1986. If I am employed, I understand that my employment is in a will regardless of any statement made by an VILLAGE OF STURTEVANT agent or in an VILLAGE OF STURTEVANT policy, practice handbook, program, or any other written or oral materials.  The information provided in this application, in my resume, and related employment documents, is true, correct, and complete. If employed, any misstatement or omission of fact on these documents may result in my dismissal. I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.								
<u> </u>								

Printed Name

Date